	Under the Paperwork	Reduction				Provon		
	PATE	NT APPLICATION	reons are required forces	U.S. Patent and Trac	temark Office the confidence	PTO/SB/06 (08-0: th 7/31/2005, OMB 0651-003 PARTMENT OF COMME	3)	
e ve	-	. THE CONTRACTOR OF THE CONTRA				PTO/SB/06 (08-03) for one through 7/31/2006, OMB 0651-003.2 fice; U.S. DEPARTMENT OF COMMERCE ass it displays a valid OMB control		
		Substitute	for Form PTO-875	TION RECORD	Application	Application or pocket Monther		
•	CLAIMS AS FILED - PART I				-9-0	4-(01.357)2		
	<b> </b>	Column 1)	ART I			100	1 .	
•		(cooms 1)	(Cotumn 2)	SMÅLL ENT		OTHER -	7	
. •	BASIC FEE	NUMBER FILED		J CHARLE ENI	ITY OR	OTHER THAN SMALL ENTITY	1	
	(3) CFR 1.18(a))		MUMBER EXTRA	RATE		Our CHILL	1	
	TOTAL CLARAGE		•		FEE	RATE FEE	7	
	(37 CFR 1.16(cl)	minus 20 =		1:	e or	100	1	
	INDEPENDENT CLAIMS			X : .	—— » —			
- 1		· minus 3 :	•	7	OR X	·		
. L	MULTIPLE DEPENDENT CL	MM PRECEUT :		-   X3 ·		<del></del>		
					OR X1	<u></u>		
. "If the difference in column 1 is less than zero, enter "O" in column 2				J (************************************	OR   +.			
- 1		Cinti	n column 2	TOTAL		==-		
	D CLAIMS	AS AMENDED - PAF	RT II		OR T	OTAL .		
F	1 ~ <i>1 - 2 ~</i> .					-		
	Cotu		umn 2) (Column 3)			1		
		HIGH	(EST	SMALL ENTITY	OR	OTHER THAN		
	all//olot as	TER NUM	BER PRESENT	CATT	<u> </u>	SMALL ENTITY		
1 8	Votal (3) GFR 1.18(c))	DMENT PREVIO	FOR EXTRA	RATE ADDITIONA		TE		
FNOM	(3) CFR 1.18(c))	Minter 1 to 7	2	FEE	.     "	TIONAL -		
🗓	independent (37 CFR 1.16(b))	Minus 70	2	x:25:	7 -	FEE		
.   ₹			3 1 7		DR 1 x 1.50	2.1		
	FIRST PRESENTATION OF A	IULTIPLE DEPENDENT CLAIM		x1/00:	OR 1 20			
- 1	(a) CR (.(e(d)) +.(20)						•	
l In	-11/-AE 11)	lRCE -		TOTAL	OR 1+:3/2	2-		
110	17 -00 (columb			ADD'L FEE	OR TOTAL		:	
	CLAIM	(Column			J OR ADD'L FE	iε		
	REMAIN	NUMBER	Dosein					
1 51	AMENOME	NY PREVIOUS PAID FOR	IV FYTOA	RATE · ADDI-	RATE			
ΙΘΉ	DI CER ELEGIS 7.5	Minute 1 11		TIONAL	''E	ADDI- TIONAL		
AMEND	ndependent 37.CFR 1.sepp 2	Minus 92	33	x125.		FEE	. )	
131		1. 1 2	1 - 1 -		OR x:50=	11.50 P	//	
<u> </u>	IRST PRESENTATION OF MUL	IPLE DEPENDENT CLASS	1	: <u>/00</u> =	OR x \$ 200	Treat 1		
- 1		· · · · · · · · · · · · · · · · · · ·	CFR 1.16(d)) +	:1BO= 1		+-/		
. 1	*		Te	OTAL	OR +340.			
	(Column 1)		AI	DO'L FEE	OR ADD'L FEE	1		
	CLAIMS	(Caturna 2) HIGHEST	(Column 3)		WORLFEE	4		
N.	REMAINING AFTER	NUMBER	PRESENT					
	TOUR AMENDMENT	PREVIOUSLY PAID FOR	EXTRA .	RATE ADDI-	RATE			
DV Inde	FR 1.16(ci)	Minus **	<del>  </del>	TIONAL	MIE	ADDI. TIONAL	•	
E Inde	pendent FR 1.10(b))	Minus	1 1.	25.	·	FEE		
13			-		OR X 50.			
FIRS	T PRESENTATION OF MULTIPL	DEDELINE	× 1/2	00.				
1		OCTENDENT CLAIM (37 CF)	1.16(d)) + c	180-				
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		,	X200018, VA 22313.1480	SEND FEES OF	COMPLETED FORMS	.S. Paleni TO THIS		
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